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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/797,553	
	Filing Date	March 10, 2004	
	First Named Inventor	William R. MOYLE	
	Art Unit		
	Examiner Name		
Total Number of Pages in This Submission	2	Attorney Docket Number	1092/US PCT

ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Serono Research Institute		
Signature			
Printed name	Steven A. Bossone, Ph.D.		
Date	August 24, 2005	Reg. No.	51,196

CERTIFICATE OF TRANSMISSION/MAILING			
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/797,553
Filing Date	March 10, 2004
First Named Inventor	William R. Moyle
Art Unit	
Examiner Name	
Attorney Docket Number	1092/US PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Applied Research Systems ARS Holding N.V.

Authorized representative

Date

19 August 2005

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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